

**AMENDMENT TRANSMITTAL LETTER**Docket No.  
1155-0304PUS1Application No.  
10/584,185-Conf. #1259Filing Date  
June 23, 2006Examiner  
C. P. JohnsonArt Unit  
1795

Applicant(s): Tomoya TERAUCHI et al.

Invention: LITHOGRAPHIC PRINTING ORIGINAL PLATE AND LITHOGRAPHIC PRINTING PLATE

**MS AF**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	6	- 20 =	0	x 52.00	0.00
Independent Claims	2	- 3 =	0	x 220.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					130.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					130.00

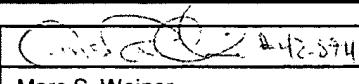
 Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. 02-2448 in the amount of \$ 130.00. A duplicate copy of this sheet is enclosed. A check in the amount of \$ \_\_\_\_\_ is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed. Credit any overpayment. Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Dated: JUN 04 2009

Marc S. Weiner  
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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p><b>FEE TRANSMITTAL</b> <b>For FY 2009</b></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<b>Complete If Known</b>					
		Application Number	10/584,185-Conf. #1259				
		Filing Date	June 23, 2006				
		First Named Inventor	Tomoya TERAUCHI				
		Examiner Name	C. P. Johnson				
Art Unit	1795						
TOTAL AMOUNT OF PAYMENT	(\$ 130.00)	Attorney Docket No.	1155-0304PUS1				
<b>METHOD OF PAYMENT</b> (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account   Deposit Account Number: <u>02-2448</u>		Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
<b>FEES CALCULATION</b>							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
	Utility	330	165	540	270	220	110
	Design	220	110	100	50	140	70
	Plant	220	110	330	165	170	85
	Reissue	330	165	540	270	650	325
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES				<u>Small Entity</u>			
<u>Fee Description</u>				<u>Fee (\$)</u>	<u>Fee (\$)</u>		
Each claim over 20 (including Reissues)				52	26		
Each independent claim over 3 (including Reissues)				220	110		
Multiple dependent claims				390	195		
<u>Total Claims</u>			<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
6 - 20 or HP			0	52.00	0.00	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>	
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>			<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>	
2 - 3 or HP			0	220.00	0.00	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>	
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>		<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
- 100 =		/50 =	(round up to a whole number) x		=		
4. OTHER FEE(S)				<u>Fees Paid (\$)</u>			
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u> <u>130.00</u>							
SUBMITTED BY							
Signature			Registration No. (Attorney/Agent)	32,181	Telephone	(703) 205-8000	
Name (Print/Type)	Marc S. Weiner		Date	JUN 04 2009			